

J.C. 973
U.S. PTO
02/26/02

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PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications
under 37 CFR 1.53(b))

Attorney Docket No.	8439M
First Inventor	Stephen W. Hendrix, et al.
Assignee	The Procter & Gamble Company
Title	Pre-Moistened Wipe With Improved Feel and Softness
Express Mail Label No.	EJ837507469US

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents.

ADDRESS TO: Box Patent Application
Assistant Commissioner for Patents
Washington, D.C. 20231

- | | |
|---|--|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)
<i>(Submit an original, and a duplicate for fee processing)</i> | 6. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) |
| 2. <input checked="" type="checkbox"/> Specification Total Pages [29]
<i>(preferred arrangement set forth below)</i> | 7. Nucleotide and/or Amino Acid Sequence Submission
<i>(if applicable, all necessary)</i> |
| - Descriptive Title of the Invention | a. <input type="checkbox"/> Computer Readable Form (CRF) |
| - Cross References to Related Applications | b. Specification Sequence Listing on: |
| - Statement Regarding Fed sponsored R&D | i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or |
| - Reference to sequence listing, a table, or a computer program listing appendix | ii. <input type="checkbox"/> Paper |
| - Background of the Invention | c. <input type="checkbox"/> Statement verifying identity of above copies |
| - Brief Summary of the Invention | |
| - Brief Description of the Drawings <i>(if filed)</i> | |
| - Detailed Description | |
| - Claim(s) | |
| - Abstract of the Disclosure | |
| 3. <input type="checkbox"/> Drawing(s) (35 USC §113) Total Sheets <input type="checkbox"/> | |
| 4. Oath or Declaration Total pages <input type="checkbox"/> | |
| a. <input type="checkbox"/> Newly executed (original or copy) | 8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) |
| b. <input type="checkbox"/> Copy from a prior application (37 CFR §1.63(d))
<i>(for continuation/divisional with Box 17 complete)</i> | 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney
<i>(when there is an assignee)</i> |
| i. <input type="checkbox"/> <u>DELETION OF INVENTORS</u>
Signed statement attached deleting inventor(s)
named in the prior application,
see 37 CFR §§1.63(d)(2) and 1.33(b). | 10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> |
| 5. <input type="checkbox"/> Application Data Sheet. See 37 CFR §1.76 | 11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations |
| | 12. <input type="checkbox"/> Preliminary Amendment |
| | 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
<i>(Should be specifically itemized)</i> |
| | 14. <input type="checkbox"/> Certified Copy of Priority Document(s)
<i>(if foreign priority is claimed)</i> |
| | 15. <input type="checkbox"/> Nonpublication Request under 35 U.S.C.
122(b)(2)(B)(i). Applicant must attach form
PTO/SB/35 or its equivalent. |
| | 16. <input type="checkbox"/> Other: |

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR §1.76:

Continuation Divisional Continuation-in-part (CIP)

of prior application No. /

Group/Art Unit: _____

Prior application information: Examiner: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

[X] Customer Number	(Insert Customer No. here) 27752	
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Name (Print/Type)	Ian S. Robinson	Registration No. (Attorney/Agent)	43,348
Signature	Ian Robinson	Date	2/26/02

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you + are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Box Patent Application, Assistant Commissioner for Patents, Washington, D.C. 20231

(Revised for P&G use 12/7/01)

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Complete if Known*Application Number**Confirmation Number**Filing Date***February 26, 2002***First Named Inventor***Stephen W. Hendrix, et al.***Examiner Name**Group/Art Unit***8439M****TOTAL AMOUNT OF PAYMENT (\$)** **740.00***Attorney Docket No.*

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)	
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number 16-2480 Deposit Account Name The Procter & Gamble Company <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under status. 37 C.F.R. §§1.16 and 1.17		3. ADDITIONAL FEES Code (\$) Fee Description Fee Paid	
		105 130 Surcharge-late filing fee or oath <input type="checkbox"/> 127 50 Surcharge-late provisional filing fee or cover sheet <input type="checkbox"/> 139 130 Non-English specification <input type="checkbox"/> 147 2,520 For filing a request for <i>ex parte</i> reexamination <input type="checkbox"/> 112 920* Requesting publication of SIR prior to Examiner's action <input type="checkbox"/> 113 1,840* Requesting publication of SIR after Examiner's action <input type="checkbox"/> 115 110 Extension for reply within 1 st month <input type="checkbox"/> 116 400 Extension for reply within 2 nd month <input type="checkbox"/> 117 920 Extension for reply within 3 rd month <input type="checkbox"/> 118 1,440 Extension for reply within 4 th month <input type="checkbox"/> 128 1,960 Extension for reply within 5 th month <input type="checkbox"/> 119 320 Notice of Appeal <input type="checkbox"/> 120 320 Filing a brief in support of an appeal <input type="checkbox"/> 121 280 Request for oral hearing <input type="checkbox"/> 138 1,510 Petition to institute a public use proceeding <input type="checkbox"/> 140 110 Petition to revive - unavoidable <input type="checkbox"/> 141 1,280 Petition to revive - unintentional <input type="checkbox"/> 142 1,280 Utility issue fee (or reissue) <input type="checkbox"/> 143 460 Design issue fee <input type="checkbox"/> 122 130 Petitions to the Commissioner <input type="checkbox"/> 123 50 Petitions related to provisional applications (37 C.F.R. 1.17(q)) <input type="checkbox"/> 126 180 Submission of Information Disclosure Statement <input type="checkbox"/> 146 740 Filing a submission after final rejection (37 CFR § 1.129(a)) <input type="checkbox"/> 149 740 For each additional invention to be examined (37 CFR § 1.129(b)) <input type="checkbox"/> 179 740 Request for Continued Examination (RCE) <input type="checkbox"/> 169 900 Request for expedited examination of a design application <input type="checkbox"/> 091 1280 Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c) <input type="checkbox"/> Other fee (specify) _____ <input type="checkbox"/> Other fee (specify) _____ <input type="checkbox"/>	

FEE CALCULATION**BASIC FILING FEE – Large Entity**

Code	\$	Fee Description	Fee Paid
101	740	Utility filing fee	[740.00]
106	330	Design filing fee	[]
108	740	Reissue filing fee	[]
114	160	Provisional filing fee	[]

SUBTOTAL (1) **(\$)[740.00]****2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE – Large Entity**

	Extra Claims	Fee from Below	Fee Paid
Total Claims	[20] - 20** = [0] x [] = []		

Independent Claims [2] - 3** = [0] x [] = []

Multiple Dependent [] = []

** or number previously paid, if greater; For Reissues, see below

Code	\$	Fee Description
103	18	Claims in excess of 20
102	84	Independent claims in excess of 3
104	280	Multiple dependent claim, if not paid
109	84	**Reissue independent claims over original patent
110	18	**Reissue claims in excess of 20 & over original patent

SUBTOTAL (2) **(\$)[0.00]**

* Reduced by Basic Filing Fee Paid

SUBTOTAL(3) **(\$)[]**

Complete (if applicable)

SUBMITTED BY	Ian S. Robinson	Registration No.	43,348	Telephone	(513) 626-3356
Name (Print/Type)		Registration No. (Attorney/Agent)		Date	2/26/02

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PATENT APPLICATION SERIAL NO. _____

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE
FEE RECORD SHEET

03/07/2002 EFLORES 00000105 162480 10083050

01 FC:101 740.00 CH

PTO-1556

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